Fill	in this info	ormation to identify your	case:			
Deb	tor 1	Valerie Brim				
		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
		Bankruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
Cas (if kno	e number	20-49256-mar			☐ Check	c if this is an
Ì					_	ded filing
Off	ficial F	orm 106Sum				
Su	mmary	of Your Assets	and Liabilities an	d Certain Statistical Information		12/15
infor	mation. Fi original fo	Il out all of your schedul	es first; then complete th	are filing together, both are equally responsible fee information on this form. If you are filing amend the box at the top of this page.	led schedu	les after you file
1.	Schedule	• A/B: Property (Official F	orm 1064/R\		Your a	f what you own
••	1a. Copy	line 55, Total real estate, f	rom Schedule A/B		\$	0.00
	1b. Copy	line 62, Total personal pro	perty, from Schedule A/B		\$	8,835.00
	1c. Copy	line 63, Total of all propert	y on Schedule A/B		\$	8,835.00
Part	2: Sum	marize Your Liabilities				
						abilities t you owe
2.			laims Secured by Property mn A, Amount of claim, at t	(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	I Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Сору	the total claims from Part	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	\$	29,050.78
				Your total liabilities	\$	29,050.78
Part	3: Sum	marize Your Income and	Expenses			
4.		I: Your Income (Official For combined monthly incom		1	\$	1,588.00
5.		J: Your Expenses (Officia r monthly expenses from l			\$	1,584.00
Part	4: Ansv	wer These Questions for	Administrative and Stati	stical Records		
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. Ch	heck this box and submit this form to the court with yo	our other sch	nedules.

Yes

What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 489.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	this information to	o identify your	case and th	is filing:			
Debt		rie Brim					
Debt	First N	ame	Middle	Name Last Name			
	e, if filing) First N	ame	Middle	Name Last Name			
Jnite	d States Bankruptcy	Court for the:	EASTERN	DISTRICT OF MICHIGAN			
Case	number 20-492 5	i6-mar			_		☐ Check if this is a
		- Trial					amended filing
)ffi	cial Form 1	06A/B					
3C	hedule A/	B: Prop	erty				12/15
nink i nform	fits best. Be as com ation. If more space i r every question.	plete and accura s needed, attach	ate as possible a separate sh	an asset only once. If an asset fits in more than e. If two married people are filing together, both neet to this form. On the top of any additional pa	are equally respo	onsible for sup	plying correct
Do	No. Go to Part 2. Yes. Where is the		e interest in a	ny residence, building, land, or similar property	?		
.1		,		What is the property? Observe What south			
. !	Street address, if available, or other description		What is the property? Check all that apply ☐ Single-family home			ms or exemptions. Put claims on <i>Schedule D:</i>	
_		☐ Duplex or multi-unit building	Creditors W		s Secured by Property. Current value of the		
_	City	State	ZIP Code	☐ Condominium or cooperative	entire prop		portion you own?
	Jily	State	ZIP Code	☐ Manufactured or mobile home	\$		\$
				☐ Land			
				☐ Investment property			
				☐ Timeshare			
				☐ Other	Doscribo th	o naturo of w	our ownership interest
				Who has an interest in the property? Check one	(such as fe		ncy by the entireties,
				Debtor 1 only			
				☐ Debtor 2 only			
_				Debtor 1 and Debtor 2 only			nunity property
_	County			At least one of the debtors and another	(see instructions)		
-	County			Other information		1	
-	County			Other information you wish to add about this property identification number:	item, such as lo	cal	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1	Valerie Brim		Case number (if known	20-4	9256-mar
3. Cars, va	ans, trucks, tracte	ors, sport utility vehicles, motorcycles			
□ No					
■ Yes					
3.1 Mak	e: Ford	Who has an interest in the property? Check one			ims or exemptions. Put I claims on Schedule D:
Mod	lel: Taurus	Debtor 1 only			ns Secured by Property.
Year	r: 2007	Debtor 2 only	Current value o	f the	Current value of the
	roximate mileage:	Debtor 1 and Debtor 2 only	entire property	•	portion you own?
Othe	er information:	At least one of the debtors and another			
		Check if this is community property (see instructions)	\$1,50	0.00	\$1,500.00
		or homes, ATVs and other recreational vehicles, other vehicles motors, personal watercraft, fishing vessels, snowmobiles, motorcy			
.pages y	you have attache	the portion you own for all of your entries from Part 2, includin d for Part 2. Write that number here			\$1,500.00
		gal or equitable interest in any of the following items?		_	urrent value of the
				Ď	ortion you own? o not deduct secured aims or exemptions.
<i>Exampl</i> □ No	old goods and fulles: Major appliant	urnishings ces, furniture, linens, china, kitchenware			
		Household furnishings		_	\$2,000.00
□ No	les: Televisions ar	nd radios; audio, video, stereo, and digital equipment; computers, prophones, cameras, media players, games	rinters, scanners; music	collectio	ns; electronic devices
		(3) TVs			\$450.00
Exampl ■ No		figurines; paintings, prints, or other artwork; books, pictures, or otherns, memorabilia, collectibles	er art objects; stamp, coi	n, or bas	eball card collections;
Exampl ■ No	ent for sports an les: Sports, photog musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables	, golf clubs, skis; canoes	and kay	vaks; carpentry tools;
				_	

D	ebtor 1	Valerie Brim			C	ase number (if known)	20-49256-mar
10	Firear Exam ■ No		s, shotgur	ns, ammunition, and relat	ed equipment		
	_	. Describe					
11	□ No	nples: Everyday clo	othes, fur	s, leather coats, designer	wear, shoes, accessories		
	Yes.	. Describe					
			Wardr	obe			\$1,000.00
12	□ No		welry, cos	stume jewelry, engageme	nt rings, wedding rings, heirloom jew	elry, watches, gems, g	old, silver
			Jewel	у			\$500.00
13	Exam ■ No	arm animals nples: Dogs, cats, b	oirds, hor	ses			
	_ 100.	. Doddibe					
14	■ No	ther personal and			llready list, including any health ai	ds you did not list	
15					including any entries for pages yo	ou have attached	\$3,950.00
Pa	art 4: De	escribe Your Financ	cial Asset	s		'	
D	o you o	wn or have any le	egal or e	quitable interest in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16	■ No		-	our wallet, in your home,	n a safe deposit box, and on hand w	hen you file your petition	on
17	Exam				certificates of deposit; shares in cre the same institution, list each.	dit unions, brokerage h	nouses, and other similar
	□ No ■ Yes.				Institution name:		
			17.1.	Checking & savings accounts	Credit Union Advantage		\$820.00
			17.2.	Checking, joint acct w/ Nia Brim	Citizens Bank		\$90.00

De	btor 1	Valerie Brim			Case number (if known)	20-49256-mar
	Examp	, mutual funds, or public oles: Bond funds, investm		age firms, money market accounts		
	■ No □ Yes		Institution or issuer nam	e:		
		ublicly traded stock and enture	interests in incorporate	ed and unincorporated businesso	es, including an intere	st in an LLC, partnership, and
	☐ Yes.	Give specific information Na	about them		% of ownership:	
	Negotia Non-ne ■ No	<i>iable instrument</i> s include _ا	personal checks, cashier those you cannot transfe	ole and non-negotiable instrumen s' checks, promissory notes, and m er to someone by signing or deliveri	noney orders.	
			uer name:			
	Examp ■ No	List each account separa	SA, Keogh, 401(k), 403(k	o), thrift savings accounts, or other p	pension or profit-sharing	plans
		туре	or account.	institution name.		
	Your sl		its you have made so that	t you may continue service or use f lic utilities (electric, gas, water), tele		nies, or others
				Institution name or individual:		
	Annuiti ■ No □ Yes		odic payment of money to	you, either for life or for a number o	of years)	
	26 U.S.0 ■ No	C. §§ 530(b)(1), 529A(b),	and 529(b)(1).	fied ABLE program, or under a qu		
	☐ Yes	Institution i	name and description. Se	eparately file the records of any inte	erests.11 U.S.C. § 521(c)	:
	■ No	equitable or future inte		r than anything listed in line 1), ar		ercisable for your benefit
	Examp ■ No		nes, websites, proceeds fr	ther intellectual property rom royalties and licensing agreeme	ents	

De	ebtor 1	Valerie Brim		Case number (if known)	20-49256-mar
27.				uar liganogo, professional ligano	00
27. Li E E C C C C C C C C C C C C C C C C C	'	oles: Building permits, exclusive li	censes, cooperative association holdings, liqu	ior licenses, professional licens	es
	27. Licenses Example No Yes. G Money or pr 28. Tax refui No Yes. Gi 29. Family si Example No Yes. Gi 30. Other am Example No Yes. Gi 31. Interests Example No Yes. No Yes. No 32. Any interest of the someone of	Give specific information about the	nem		
		censes, franchises, and other general camples: Building permits, exclusive lice. No Yes. Give specific information about the year or property owed to you? In a refunds owed to you. Yes. Give specific information about the year. Past due or lump sum alimon to yes. Give specific information In a refunds owed to you. Yes. Give specific information			
M	27. Licenses, franchises, and oth Examples: Building permits, examples: Building permits, examples: Give specific information Money or property owed to you? 28. Tax refunds owed to you No Yes. Give specific information 29. Family support Examples: Past due or lump su No Yes. Give specific information 30. Other amounts someone owe Examples: Unpaid wages, disa benefits; unpaid load benefits; unpaid load No Yes. Give specific information 31. Interests in insurance policies Examples: Health, disability, or No Yes. Name the insurance con City 32. Any interest in property that it if you are the beneficiary of a list someone has died. No Yes. Give specific information 33. Claims against third parties, we Examples: Accidents, employntation No No No No Claims against third parties, we Examples: Accidents, employntation	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.		funds owed to you			
	■ Yes.	Give specific information about th	em, including whether you already filed the re	eturns and the tax years	
			Anticipated income tax refunds		\$2,000.00
29.	Examp	oles: Past due or lump sum alimor	ny, spousal support, child support, maintenan	ce, divorce settlement, property	settlement
	⊔ Yes.	Give specific information			
30.	Examp ■ No	oles: Unpaid wages, disability insubenefits; unpaid loans you m		vacation pay, workers' comper	nsation, Social Security
	No. Yes. Give specific information about them				
31.	Examp ■ No	oles: Health, disability, or life insur		nomeowner's, or renter's insurar	nce
				deneficiary:	
32.					
	someo		r, expect proceeds from a life insurance policy	 or are currently entitled to rece 	eive property because
	☐ Yes.	Give specific information			
		L_			
33.	_Examp			lemand for payment	
		Describe each claim			
	— 103.	Describe each dailti			

Debtor	1 _1	/alerie Brim		Case number (if known)	20-49256-mar
34. Oth	er cor	ntingent and ur	iquidated claims of every nature, including counte	erclaims of the debtor and rights to	set off claims
■N		escribe each cla	_		
шт	es. De	escribe each cia	········		
35. Any ■ N		cial assets you	did not already list		
		ve specific infor	nation		
		•			
				r	
			all of your entries from Part 4, including any entrie		\$2,910.00
10	ıı aıt	4. Write that h			· ·
Part 5:	Descr	ibe Any Busines	Related Property You Own or Have an Interest In. List an	y real estate in Part 1.	
			or equitable interest in any business-related property?		
	Go to	Part 6. o line 38.			
_ .c	.s. 00 t	o iii ic 56.			
					Current value of the portion you own? Do not deduct secured
					claims or exemptions.
38. Acc	counts	receivable or	ommissions you already earned		
		escribe			
ш,	es. De	-scribe			
39. Off i <i>Ex</i>	ice eq	L uipment, furnis s: Business-rela	ings, and supplies d computers, software, modems, printers, copiers, fa	x machines, rugs, telephones, desks,	chairs, electronic devices
□N	lo				
ΠY	es. De	escribe			
40. Ma	chiner	y, fixtures, equ	oment, supplies you use in business, and tools of	your trade	
ΠN	lo.				
		escribe			
		Γ			
41. Inv	entor	· /			
□N					
		escribe			
		Γ			
42 Inte	arpete	in nartnershin	or joint ventures		
		paraiersiiip:	or joint voltares		
□ N □ Y		ve specific info	nation about them		
		, - _F 200 IIIIOI	Name of entity:	% of ownership:	
				%	

Debtor	1 Valerie Brim	Case number (if kr	nown) .	20-49256-mar
		g lists, or other compilations		
Do you Composite Composi	your lists include per	rsonally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	□ No			
	☐ Yes. Describe	2		
44. A ny	business-related p	property you did not already list		
ПΥ	es. Give specific info	ormation		
		of all of your entries from Part 5, including any entries for pages you have attache number here	ed	
				_
Part 6:		and Commercial Fishing-Related Property You Own or Have an Interest In. interest in farmland, list it in Part 1.		
		ny legal or equitable interest in any farm- or commercial fishing-related property?		
	No. Go to Part 7. Yes. Go to line 47.			
_	res. Go to line 47.			Current value of the
				portion you own? Do not deduct secured claims or exemptions.
		oultry, farm-raised fish		
	o es			
40. 6	ا	- an hammadad		
	ps—either growing	g or narvested		
	o es. Give specific info	ormation		
40 Far	m and fishing oqui	pment, implements, machinery, fixtures, and tools of trade		
		prinent, implements, macrimery, fixtures, and tools of trade		
	o es			
	1			
50 Far i	ا m and fishing sunn	plies, chemicals, and feed		
		mes, chemicals, and recu		
	o es			
	1			
51 Am	farm- and commo	rcial fishing-related property you did not already list		
_		i viai noming related property you did not already not		
□ N □ Y	o es. Give specific info	ormation		
	Form 106A/B	Schedule A/B: Property		page 7

Deb	tor 1	Valerie Brim		Case number (if known)	20-49256-mar
52.		he dollar value of all of your entries from Part 6, includi art 6. Write that number here		,	
Part	7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	Examp] No	have other property of any kind you did not already list les: Season tickets, country club membership Give specific information	17		
		Garnished funds			\$475.00
54.	Add t	he dollar value of all of your entries from Part 7. Write th	nat number here		\$475.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$0.00
56.	Part 2	: Total vehicles, line 5	\$1,500.00		
57.	Part 3	: Total personal and household items, line 15	\$3,950.00		
58.	Part 4	: Total financial assets, line 36	\$2,910.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	\$475.00		
62.	Total	personal property. Add lines 56 through 61	\$8,835.00	Copy personal property to	stal \$8,835.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$8,835.00

nation to identify your	case:			
Valerie Brim				
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
nkruptcy Court for the:	EASTERN DISTRICT O	F MICHIGAN		
20-49256-mar				
			☐ Check if this is an	an
			amended filing	
	Valerie Brim First Name First Name hkruptcy Court for the:	First Name Middle Name First Name Middle Name nkruptcy Court for the: EASTERN DISTRICT O	Valerie Brim First Name Middle Name Last Name First Name Middle Name Last Name nkruptcy Court for the: EASTERN DISTRICT OF MICHIGAN	Valerie Brim First Name Middle Name Last Name First Name Middle Name Last Name Akruptcy Court for the: EASTERN DISTRICT OF MICHIGAN 20-49256-mar

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)							
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	e Amount of the exemption you claim Specific laws that al		Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	2007 Ford Taurus Line from Schedule A/B: 3.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(2)			
	Line Ironi Schedule A/B. 3.1			100% of fair market value, up to any applicable statutory limit				
	Household furnishings Line from Schedule A/B: 6.1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)			
	Line Ironi Schedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit				
	(3) TVs Line from Schedule A/B: 7.1	\$450.00		\$450.00	11 U.S.C. § 522(d)(3)			
	Line nom <i>Schedule A/D.</i> 7.1			100% of fair market value, up to any applicable statutory limit				
	Wardrobe Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)			
	Line nom Schedule AVD. 11.1			100% of fair market value, up to any applicable statutory limit				
	Jewelry Line from Schedule A/B: 12.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)			
	Line from Scriedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit				

Del	btor 1 Valerie Brim			Case number (if known)	20-49256-mar	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	e Amount of the exemption you claim		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Checking & savings accounts: Credit Union Advantage	\$820.00		\$820.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
	Checking, joint acct w/ Nia Brim: Citizens Bank	\$90.00		\$90.00	11 U.S.C. § 522(d)(5)	
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit		
	Anticipated income tax refunds Line from Schedule A/B: 28.1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(5)	
	Line Iron Schedule A/B. 25.1			100% of fair market value, up to any applicable statutory limit		
	Garnished funds Line from Schedule A/B: 53.1	\$475.00		\$475.00	11 U.S.C. § 522(d)(5)	
	Line Holli Schedule A/B. 33.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption o (Subject to adjustment on 4/01/22 and every 3 No			ed on or after the date of adjustmer	nt.)	
	☐ Yes. Did you acquire the property covered ☐ No	d by the exemption wi	ithin 1	215 days before you filed this case'	?	
	□ N0 □ Yes					

Elli to this to force					
	nation to identify yo	ur case:			
Debtor 1	Valerie Brim First Name	Middle Name Last Naı	me	-	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Na	ne		
United States Bar	nkruptcy Court for the	EASTERN DISTRICT OF MICHIGAN		-	
Case number 2	20-49256-mar				
(if known)	10 43230 mai			☐ Chec	k if this is an
				amen	ded filing
Official Form	106D				
		s Who Have Claims Secu	red by Propert	V	12/15
		If two married people are filing together, both			
		out, number the entries, and attach it to this fo			
,	have claims secured b	y your property?			
■ No. Check	this box and submit	this form to the court with your other schedul	es. You have nothing else t	to report on this form.	
☐ Yes. Fill in	all of the information	below.	· ·	·	
Part 1: List Al	I Secured Claims				
		more than one secured claim, list the creditor sepa		Column B	Column C
		s a particular claim, list the other creditors in Part 2 ical order according to the creditor's name.	2. As Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1.		Describe the property that secures the claim	:		
Creditor's Name)				_
		As of the date you file, the claim is: Check all the	hat		
		apply.			
Number Street	City, State & Zip Code	☐ Contingent☐ Unliquidated			
rumber, encet,	Ony, State & Zip Gode	☐ Disputed			
Who owes the de	ht? Chark and	Nature of lien. Check all that apply.			
Debtor 1 only	bt: Check one.	☐ An agreement you made (such as mortgage	or		
Debtor 2 only		secured car loan)	OI .		
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	en)		
	ne debtors and another	☐ Judgment lien from a lawsuit	J.,		
Check if this cla	aim relates to a	Other (including a right to offset)			
Date debt was incu	urred	Last 4 digits of account number			
	•	Column A on this page. Write that number here:		4	
Write that number		the dollar value totals from all pages.			

Fill in this inform	mation to identify your case:				
Debtor 1	Valerie Brim				
Debtor 2	First Name Mid	dle Name Last Name			
(Spouse if, filing)	First Name Mic	dle Name Last Name			
United States Ba	ankruptcy Court for the: EASTE	RN DISTRICT OF MICHIGAN			
Case number (if known)	20-49256-mar			☐ Check	cif this is an
,				_	ded filing
Off: a: a!	400E/E				
Official Forn		ve Unsecured Claims			12/15
		r creditors with PRIORITY claims and Part 2 fo	r creditors with NONPE	RIORITY claims I	
any executory cont Schedule G: Execu Schedule D: Credit	tracts or unexpired leases that could utory Contracts and Unexpired Lease tors Who Have Claims Secured by Pr ntinuation Page to this page. If you h	result in a claim. Also list executory contracts (Official Form 106G). Do not include any creo operty. If more space is needed, copy the Part ave no information to report in a Part, do not fi	s on Schedule A/B: Pro litors with partially sec you need, fill it out, nu	pperty (Official Fo cured claims that mber the entries	rm 106A/B) and on are listed in in the boxes on the
Part 1: List A	II of Your PRIORITY Unsecured	Claims			
	ors have priority unsecured claims a	gainst you?			
No. Go to F	Part 2.				
☐ Yes.					
listed, ident much as po	tify what type of claim it is. If a claim has pssible, list the claims in alphabetical or	editor has more than one priority unsecured claim s both priority and nonpriority amounts, list that claider according to the creditor's name. If you have marticular claim, list the other creditors in Part 3.	m here and show both p	priority and nonprio	rity amounts. As
(For an exp	planation of each type of claim, see the	instructions for this form in the instruction booklet.)	Total claim	Priority	Nonpriority
			Total Claim	amount	amount
2.1.					
		Last 4 digits of appount number			
Priority Cr	reditor's Name	Last 4 digits of account number			_
		When was the debt incurred?			
Number S	Street City State Zip Code	As of the date you file, the claim is: Check at	I that apply		
Who incurre	d the debt? Check one.	☐ Contingent			
_		☐ Unliquidated☐ Disputed			
☐ Debtor 1 c	•	☐ Disputed			
Debtor 2 o	only and Debtor 2 only				
	ne of the debtors and another	Type of PRIORITY unsecured claim:			
☐ Check if t	this claim is for a community debt	☐ Domestic support obligations			
Is the claim	subject to offset?	☐ Taxes and certain other debts you owe the	novernment		
□ No		☐ Claims for death or personal injury while you	-		
☐ Yes		_			
— 103					_
Part 2: List A	II of Your NONPRIORITY Unsec	ured Claims			
3. Do any credito	ors have nonpriority unsecured clair	ns against you?			
☐ No. You ha	ive nothing to report in this part. Submit	this form to the court with your other schedules.			
Yes.					
			and alaim K C	h	
unsecured clai	m, list the creditor separately for each of	alphabetical order of the creditor who holds elaim. For each claim listed, identify what type of cl r creditors in Part 3.lf you have more than three no	aim it is. Do not list claim	ns already included	I in Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

Debtor 1	Valerie Brim		Case number (if known) 20-49256	-mar				
	*DTE Energy	Last 4 digits of account number		\$500.00				
	Nonpriority Creditor's Name One Energy Plaza, 688 WCB Attn: Legal Dept Detroit, MI 48226	When was the debt incurred?						
	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.							
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	t				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	□ Yes	Other. Specify Utility Serv	_					
	AmSher Collection Services Nonpriority Creditor's Name	Last 4 digits of account number	0211	\$674.00				
	4524 Southlake Parkway Suite 15	hlake Parkway When was the debt incurred?	Opened 04/20 Last Active 01/20	_				
	Birmingham, AL 35244 Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply					
	Who incurred the debt? Check one.	,	or chook an anat apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	t					
	■ No	Debts to pension or profit-sharing						
	Yes	Other. Specify Collection						
4.3	Citizens Bank	Last 4 digits of account number	3946	\$690.00				
	Nonpriority Creditor's Name 1 Citizens Dr. Ms: Rop 15b Riverside, RI 02915	When was the debt incurred?	Opened 03/18 Last Active 10/19	_				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim						
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another							
	☐ Check if this claim is for a community	y Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
	Yes	Other. Specify Credit Card						

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor	1 Valerie Brim		Case number (if known)	20-49256-mar		
4.4	Citizens Bank	Last 4 digits of account number	9096		\$300.00	
	Nonpriority Creditor's Name 1 Citizens Dr. Ms: Rop 15b Riverside, RI 02915	When was the debt incurred?	Opened 05/10 Last 9/21/15	Active		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
	At least one of the debtors and another	Student loans	u Ciaiiii.			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not		
	No	Debts to pension or profit-sharin	a plans, and other similar de	ahte		
	Yes	■ Other. Specify Credit Card				
4.5	Comenity Bank/Avenue Nonpriority Creditor's Name	Last 4 digits of account number	0977		\$250.00	
	Attn: Bankruptcy	When was the debt incurred?	Opened 02/12 Last Active 10/16/15			
	Number Street City State Zip Code	As of the date you file, the claim				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:			
	Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce	that you did not		
	Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	a plane, and other similar de	shte		
	_	·	טוט			
	Yes	Other. Specify Charge Acc	Jount			
4.6	Comenity Bank/Dots Nonpriority Creditor's Name	Last 4 digits of account number	2670		\$50.00	
	Attn: Bankruptcy Po Box 182125	When was the debt incurred?	Opened 05/13 Last 5/23/16	Active		
	Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not		
	■ No	Debts to pension or profit-sharing	sharing plans, and other similar debts			
	☐ Yes ☐ Other. Specify Charge Account					

Debtor	Valerie Brim		Case number (if known)	20-49256-mar		
4.7	Credit Acceptance	Last 4 digits of account number	2997		\$8,601.00	
	Nonpriority Creditor's Name 25505 West 12 Mile Road Suite 3000 Southfield, MI 48034	When was the debt incurred?	Opened 04/19 Last 02/20	Active		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	· ·	•		
	No	Debts to pension or profit-sharin	g plans, and other similar deb	ts		
	Yes	■ Other. Specify Automobile	•			
4.8	Credit Collection Services Nonpriority Creditor's Name	Last 4 digits of account number	9125		\$1,492.00	
	Attn: Bankruptcy 725 Canton St	When was the debt incurred?	Opened 3/03/20 La 01/20	st Active		
	Norwood, MA 02062 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce t	nat you did not		
	No	Debts to pension or profit-sharin	- :	ts		
	Yes	Other. Specify Collection				
4.9	Empower Retirement Nonpriority Creditor's Name	Last 4 digits of account number	773A		\$5,272.88	
	PO Box 5520 Denver, CO 80217	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharin	a nlans, and other similar deh	ts		
	■ No □ Yes	·	g piano, and oner ominal dec			
	⊔ res	Other. Specify Loan				

Debt	or 1 Valerie Brim		Case number (if known)	20-49256-mar			
4.1 0	Enhanced Recovery Corp	Last 4 digits of account number	6654		\$63.00		
	Nonpriority Creditor's Name Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256	When was the debt incurred?	Opened 03/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar de	ebts			
	Yes	■ Other Specify Collection					
4.1	Finance System, Inc.	Last 4 digits of account number	4395		\$123.00		
1	Nonpriority Creditor's Name	Last 4 digits of account number			Ψ123.00		
	Attn: Bankruptcy 5703 National Road East Po Box 786	When was the debt incurred?	Opened 7/21/17 La 02/17	ast Active			
	Richmond, IN 47374 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce	that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar de	ebts			
	Yes	Other. Specify Collection Associate	Attorney Southfield F	Radiology			
4.1 2	Ford Motor Credit Nonpriority Creditor's Name	Last 4 digits of account number	2027		\$9,118.90		
	National Bankruptcy Service Center Po Box 62180 Colorado Springs, CO 80962	When was the debt incurred?	Opened 05/14 Last 5/29/20	Active			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar de	ebts			
	Yes	Other. Specify Judgment					

Schedule E/F: Creditors Who Have Unsecured Claims

Ford Motor Credit	Last 4 digits of account number	4506	\$200.
Nonpriority Creditor's Name National Bankruptcy Service Center Po Box 62180 Colorado Springs, CO 80962	When was the debt incurred?	Opened 03/12 Last Active 7/02/14	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
At least one of the debtors and another	Student loans	d claim:	
☐ Check if this claim is for a community debt		tration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Lease		
Kohls/Capital One	Last 4 digits of account number	9314	\$150.
Nonpriority Creditor's Name Attn: Credit Administrator		Opened 08/16 Last Active	
Po Box 3043	When was the debt incurred?	2/19/19	
Milwaukee, WI 53201			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	Пол		
_	☐ Contingent		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
Yes	Other. Specify Charge Acc	count	
MRS BPO, Lic	Last 4 digits of account number	3417	\$156 .
Nonpriority Creditor's Name Attn: Bankruptcy 1930 Olney Ave	When was the debt incurred?	Opened 04/20 Last Active 01/20	
Cherry Hill, NJ 08003	A control of the state of the s		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан tnat apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No No	Debts to pension or profit-sharing		
☐ Yes	Other. Specify Collection	Attorney Directv	

Schedule E/F: Creditors Who Have Unsecured Claims

Debto	Valerie Brim		Case number (if known)	20-49256-mar			
4.1	Synchrony Bank	Last 4 digits of account number	3182	\$225.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 12/02 Last A 04/04	Active			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce the	at you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts	S			
	Yes	Other. Specify					
4.1	Target	Last 4 digits of account number	5581	\$115.00			
	Nonpriority Creditor's Name c/o Financial & Retail Srvs Mailstop BT POB 9475 Minneapolis, MN 55440	When was the debt incurred?	Opened 09/11 Last A 10/10/11	Active			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	•					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	at you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debt	5			
	Yes	Other. Specify Credit Card	ı				
4.1	Wakefield & Associates	Last 4 digits of account number	EP6X,5799	\$1,070.00			
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 8/12/16				
	10800 East Bethany Drive Aurora, CO 80014						
Number Street City State Zip Code Who incurred the debt? Check one.		As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Medical					

Part 3: List Others to Be Notified About a Debt That You Already Listed

Schedule E/F: Creditors Who Have Unsecured Claims

Official Form 106 E/F

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Debtor 1 Valerie Brim		Case number (if known)	20-49256-mar
have more than one creditor for any of the debts the notified for any debts in Parts 1 or 2, do not fill out		additional creditors here. If yo	u do not have additional persons to be
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
*Ford Motor Credit Company, LLC	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Prior	ity Unsecured Claims
National Bankruptcy Service Center P.O. Box 537901 Livonia, MI 48153-9905		Part 2: Creditors with Nonp	oriority Unsecured Claims
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
*Third Party Withholding Unit	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims	
Michigan Department of Treasury PO Box 30785		Part 2: Creditors with Nonp	oriority Unsecured Claims
Lansing, MI 48909	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
46th District Court	Line 4.12 of (Check one):	☐ Part 1: Creditors with Prior	ity Unsecured Claims
#GC174857 26000 Evergreen Rd. Southfield, MI 48076		Part 2: Creditors with Nonp	oriority Unsecured Claims
Jodumeia, iiii 40070	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Szuba & Assoc. P.L.L.C.	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Prior	ity Unsecured Claims
40600 Ann Arbor Road #100		Part 2: Creditors with None	priority Unsecured Claims
Plymouth, MI 48170	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that	6g.	\$ 0.00
	6h.	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 29,050.78
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 29,050.78

Official Form 106 E/F

Fill in this infor					
Debtor 1	Valerie Brim				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F MICHIGAN		
Case number	20-49256-mar				
(if known)					 Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Henry Estell 20540 Pierson Detroit, MI 48219	Rent

Fill in this i	nformation to identify you	ur case:			
Debtor 1	Valerie Brim				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the	EASTERN DISTRICT OF M	MICHIGAN		
Case numb	er 20-49256-mar				
(if known)	20 10200 mai				☐ Check if this is an amended filing
Official	Form 106H				
Sched	ule H: Your Co	debtors			12/15
ill it out, an our name a	d number the entries in the difference of the di	qually responsible for supplying boxes on the left. Attach then). Answer every question.	e Additional Page	to this page. On the top of	ed, copy the Additional Page, any Additional Pages, write
■ No □ Yes					
0.1454				0.40	
		ou lived in a community prope na, Nevada, New Mexico, Puerto			ates and territories include
	,	.,		3 ,,	
	Go to line 3.				
⊔ Yes.	Did your spouse, former sp	oouse, or legal equivalent live wi	th you at the time?		
_	□ No □ Yes.				
_		ato or torritory did you live?		Fill in the name and o	urrent address of that person.
	in which community st	ate or territory did you live?			urrent address of that person.
	City	State	Zip Code	9	
in line : Form 1 out Col	2 again as a codebtor only	y if that person is a guarantor	or cosigner. Make	sure you have listed the c 06G). Use Schedule D, Sch	ith you. List the person shown reditor on Schedule D (Official ledule E/F, or Schedule G to fill or to whom you owe the debt
	ame, Number, Street, City, State and	ZIP Code		Check all schedules th	•
3.1				Schedule D, line	
N	lame			☐ Schedule E/F, line	
				☐ Schedule G, line _	
	lumber Street city	State	ZIP Code		
3.2				☐ Schedule D, line	
	lame			Schedule E/F, line	
				☐ Schedule G, line	
N	lumber Street			_	
С	ity	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1
Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com
20-49256-mar Doc 11 Filed 09/08/20 Entered 09/08/20 14:17:24 Page 23 of 35

Fill	in this information to identify you	ır case:								
	btor 1 Valerie B									
	btor 2				_					
Uni	ited States Bankruptcy Court for	the: EASTERN DISTRICT	OF MICHIGAN							
	20-49256-mar (20-49256-mar)		-				ded filing nent showin	ng postpetition		
O	fficial Form 106I							ollowing date.		
_	chedule I: Your In	come				MM / DD/	YYYY		12/15	
spo atta	plying correct information. If y use. If you are separated and y ch a separate sheet to this for Describe Employme	your spouse is not filing w m. On the top of any addit	ith you, do not inclu	de infori	natio	on about your s	ouse. If m	ore space is	needed,	
1.	Fill in your employment information.		Debtor 1			Debtor 2 or non-filling spouse				
	If you have more than one job, attach a separate page with information about additional employers.	F	■ Employed			□ Em	oloyed			
		Employment status	☐ Not employed			☐ Not	employed			
		Occupation	Unemployed							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include stude or homemaker, if it applies.	nt Employer's address								
		How long employed t	here?							
Par	rt 2: Give Details About I	Monthly Income								
	mate monthly income as of the use unless you are separated.	e date you file this form. If	you have nothing to r	eport for	any l	ine, write \$0 in th	e space. In	clude your no	n-filing	
-	ou or your non-filing spouse have e space, attach a separate shee		ombine the informatio	n for all e	emplo	oyers for that per	son on the li	nes below. If	you need	
						For Debtor 1		btor 2 or ing spouse		
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	0.00	\$	N/A		
3.	Estimate and list monthly ov	rertime pay.		3.	+\$	0.00	+\$	N/A		
4.	Calculate gross Income. Ad	d line 2 + line 3.		4.	\$	0.00	\$	N/A		

Deb	tor 1	Valerie Brim	_	Case no	umber (if known)	20-49256	-mar	
				For D	ebtor 1	For Debt	or 2 or g spouse	
	Cop	y line 4 here	4.	\$	0.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	\$	0.00	+ \$	N/A N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— ^{311.∓} 6.	\$	0.00	* \$ \$	N/A N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 	0.00	\$	N/A	
8.		all other income regularly received:	۲.	Ψ	0.00	Ψ	IN/A	
0.	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent		· 		·		
		regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$ —	1,588.00	φ	N/A N/A	
	8e.	Social Security	8e.	\$—	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive	00.	*—	0.00		11//	
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	:					
		Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,588.00	\$	N/A]
			_					1
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$	1,	,588.00 + \$	N/	A = \$	1,588.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule use contributions from an unmarried partner, members of your household, your r friends or relatives.	depen					
	Do n Spec	not include any amounts already included in lines 2-10 or amounts that are not cify:	availab	le to pa	y expenses list		lule J. 1. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					2. \$	1,588.00
							Combine	
13.	Do y ■	/ou expect an increase or decrease within the year after you file this form No.	?					
	_	Yes. Explain:						
	_	···						

	in this informs	tion to identify							
FIII	in this informa	tion to identify yo	our case:						
Deb	otor 1	Valerie Brim	ı				c if this is:		
Deb	otor 2						An amended filing A supplement show	ring postpetition chap	oter
	ouse, if filing)						3 expenses as of t		ptoi
Unit	ted States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF MICHIO	GAN	<u></u>	MM / DD / YYYY		
Cas	se number 20)-49256-mar							
(If k	nown)								
O:	fficial Fo	rm 106J			-				
S	chedule	J: Your l	Expen	ses					12/15
Be info	as complete a	and accurate as	s possible. eded, atta	If two married people a ch another sheet to this					
Par		ibe Your House	hold						
1.	Is this a joir								
	■ No. Go to	line 2. s Debtor 2 live i	in a senar	ata housahold?					
	□ 163. D06		iii a sepaia	ate nousenolu:					
	= ::	-	st file Officia	al Form 106J-2, Expenses	s for Separate House	hold of Debto	or 2.		
2.	Do you have	e dependents?	■ No						
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state							□ No	
	dependents	names.						☐ Yes ☐ No	
								☐ No ☐ Yes	
								□ No	
								☐ Yes	
								□ No	
2	Do your ove	oncoc includo	_					☐ Yes	
3.	expenses of	enses include f people other tl d your depende	han 🗖	No Yes					
Par	t 2: Estim	ate Your Ongoi	ng Monthi	y Expenses					
exp				uptcy filing date unless y y is filed. If this is a sup					
Inc	lude expense	s paid for with r	non-cash g	government assistance	if you know				
the	value of such	n assistance and		luded it on Schedule I:			Your expe	enses	
(0)	ficial Form 10	OI. <i>)</i>					тош охро		
4.		or home owners and any rent for the		ses for your residence. r lot.	Include first mortgage	4. \$		300.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a. \$		0.00	
	4b. Prope	rty, homeowner's				4b. \$		0.00	
				pkeep expenses		4c. \$		0.00	
5.		owner's associat		dominium dues o ur residence, such as ho	ome equity loops	4d. \$ 5. \$		0.00	
J.	Additional	nortgage payille	since for yo	ai residence, such as no	mic equity toalis	Э. Ф		0.00	

Official Form 106J Schedule J: Your Expenses 20-49256-mar Doc 11 Filed 09/08/20 Entered 09/08/20 14:17:24 Page 26 of 35

Debtor 1 Val	erie Brim	Case num	ber (if known)	20-49256-mar
6. Utilities:				
	etricity, heat, natural gas	6a.	\$	150.00
	er, sewer, garbage collection	6b.	\$	100.00
6c. Tele	phone, cell phone, Internet, satellite, and cable services	6c.		150.00
6d. Oth	er. Specify:	6d.	\$	0.00
	housekeeping supplies		\$	255.00
	and children's education costs	8.	\$	0.00
Clothing.	laundry, and dry cleaning	9.	·	0.00
_	care products and services	10.	\$	90.00
	nd dental expenses	11.		150.00
	ation. Include gas, maintenance, bus or train fare.			100.00
	lude car payments.	12.	\$	100.00
	nent, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	e contributions and religious donations	14.	\$	0.00
5. Insurance	•		·	
	ude insurance deducted from your pay or included in lines 4 or 20.			
15a. Life	insurance	15a.	\$	0.00
15b. Hea	Ith insurance	15b.	\$	0.00
15c. Veh	icle insurance	15c.	\$	289.00
15d. Oth	er insurance. Specify:	15d.		0.00
	not include taxes deducted from your pay or included in lines 4 or 20.		·	0.00
Specify:	The motion in the deduction from your pay or motions in miss 1 of 201	16.	\$	0.00
	nt or lease payments:			
	payments for Vehicle 1	17a.	\$	0.00
17b. Car	payments for Vehicle 2	17b.	\$	0.00
17c. Oth	er. Specify:	17c.	\$	0.00
	er. Specify:	17d.	*	0.00
	nents of alimony, maintenance, and support that you did not report as		·	0.00
	from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
	ments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
0. Other rea	property expenses not included in lines 4 or 5 of this form or on Sch	nedule I: Yo	our Income.	
20a. Mor	tgages on other property	20a.	\$	0.00
20b. Rea	l estate taxes	20b.	\$	0.00
20c. Pro	perty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Mai	ntenance, repair, and upkeep expenses	20d.	\$	0.00
	neowner's association or condominium dues	20e.	\$	0.00
1. Other: Sp	ecify.	21.	·	0.00
ош.от. ор				0.00
	your monthly expenses			
	nes 4 through 21.		\$	1,584.00
22b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 $$		\$	
22c. Add I	ne 22a and 22b. The result is your monthly expenses.		\$	1,584.00
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	your monthly net income.		_	
	y line 12 (your combined monthly income) from Schedule I.	23a.	*	1,588.00
23b. Cop	y your monthly expenses from line 22c above.	23b.	-\$	1,584.00
	tract your monthly expenses from your monthly income.	230	\$	4.00
The	result is your monthly net income.	23c.	Ψ	7.00
For example	spect an increase or decrease in your expenses within the year after yet, do you expect to finish paying for your car loan within the year or do you expect you to the terms of your mortgage?			ease or decrease because of a
	Evoleia hara:			
☐ Yes.	Explain here:			

Official Form 106J Schedule J: Your Expenses 20-49256-mar Doc 11 Filed 09/08/20 Entered 09/08/20 14:17:24 Page 27 of 35

Fill in this infor	mation to identify you	r case:			
Debtor 1	Valerie Brim				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN		
Case number (if known)	20-49256-mar				☐ Check if this is an amended filing
Official Form Declarat		an Individual	Debtor's Sc	hedules	12/15
You must file thi obtaining mone	s form whenever you	in connection with a bankı	or amended schedules.	Making a false statemer	nt, concealing property, or r imprisonment for up to 20
Sig	n Below				
Did you pa	y or agree to pay som	eone who is NOT an attorn	ey to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. I	Name of person				tcy Petition Preparer's Notice, d Signature (Official Form 119)
	ilty of perjury, I declar e true and correct.	e that I have read the sumn	nary and schedules filed	l with this declaration ar	nd
X /s/ Val	erie Brim		X		
Valerie			Signature of D	Debtor 2	

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Date

Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com

Signature of Debtor 1

Date September 8, 2020

Best Case Bankruptcy

Fill ir	this inform	ation to identify you	r case:						
Debte	or 1	Valerie Brim							
		First Name	Middle Name	Last Name					
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name					
Unite	d States Bar	kruptcy Court for the:	EASTERN DISTRICT OF	MICHIGAN					
Caca	number 2	0-49256-mar							
(if know		0-49230-IIIaI			_	heck if this is an mended filing			
~ "									
	<u>cial For</u>		Affaire for Indivis	luala Filipa far D					
Sta	tement	of Financial	Affairs for Individ	duals Filling for B	ankruptcy	4/19			
inforn	nation. If me er (if known	ore space is needed,). Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup additional pages, write you				
		current marital statu		21704 201010					
ı	Married								
	☐ Not mari	ried							
2. [During the last 3 years, have you lived anywhere other than where you live now?								
	No								
	_	all of the places you I	ived in the last 3 years. Do no	ot include where you live now	·.				
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
					ity property state or territory co, Texas, Washington and W				
	■ Na								
•	■ No □ Yes. Ma	ke sure vou fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).					
		,	round in rour doubline (d.						
Part :	2 Explain	n the Sources of You	r Income						
F	ill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?			
	□ No								
Ī	-	in the details.							
			Deliterat		Dalifa a O				
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income			
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)			
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$1.00	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

De	btor 1 V	alerie Brim			Case	e number (if known) 20	0-49256-mar
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply	
		ndar year: December	31, 2019)	■ Wages, commissions, bonuses, tips	\$3,305.00	☐ Wages, commiss bonuses, tips	sions,
				☐ Operating a business		☐ Operating a busi	iness
		ndar year be December		■ Wages, commissions, bonuses, tips	\$17,412.00	☐ Wages, commiss bonuses, tips	sions,
				☐ Operating a business		☐ Operating a busi	iness
	List each	-	he gross inc	se and you have income that your from each source separa	-	hat you listed in line 4.	
				Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of income	e Gross income
				Describe below.	each source (before deductions and exclusions)	Describe below.	(before deductions and exclusions)
		ndar year: December	31, 2019)	UIA	\$7,020.00		
				Pension	\$29,483.00		
		ndar year be December		Pension	\$5,298.00		
Pa	rt 3: Lis	st Certain Pa	yments You	ı Made Before You Filed for	Bankruptcy		
6.	Are eithe	Neither De	ebtor 1 nor l	2's debts primarily consume Debtor 2 has primarily consu a personal, family, or househo	ımer debts. Consumer debts	s are defined in 11 U.S	S.C. § 101(8) as "incurred by an
		During the No.	90 days before Go to line 3	ore you filed for bankruptcy, di 7.	d you pay any creditor a tota	I of \$6,825* or more?	
		☐ Yes	paid that connot include	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for tl	nts for domestic support oblig nis bankruptcy case.	ations, such as child s	support and alimony. Also, do
		* Subject	to adjustmer	nt on 4/01/22 and every 3 year	s after that for cases filed on	or after the date of adj	justment.
	Yes			or both have primarily consu ore you filed for bankruptcy, di		I of \$600 or more?	
		■ No.	Go to line	7.			
		□ Yes	include pay	each creditor to whom you pai yments for domestic support o r this bankruptcy case.			paid that creditor. Do not , do not include payments to an
	Credito	r's Name and	d Address	Dates of payme	nt Total amount paid	Amount you Wastill owe	as this payment for

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

7.	Within 1 year before you filed for bankruptc <i>Insiders</i> include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	tners; relatives of any gene control, or owner of 20% or	eral partners; partne more of their voting	rships of which you securities; and an	u are a genera y managing a	al partner; corporations gent, including one for
	■ No □ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe		
3.	Within 1 year before you filed for bankruptc insider? Include payments on debts guaranteed or cosique payments on debts guaranteed or cosique payments.		nents or transfer a	ny property on ac	count of a de	ebt that benefited an
	No No					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
			paid	still owe	Include cred	itor's name
Par	rt 4: Identify Legal Actions, Repossessions	s, and Foreclosures				
9.	Within 1 year before you filed for bankruptc List all such matters, including personal injury of modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, fo	oreclosed, garnis	hed, attached	I, seized, or levied?
	□ No. Go to line 11.■ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
	FMCC/Szuba & Assoc. P.L.L.C. 40600 Ann Arbor Road	income tax refund 4/20			0	\$475.00
	#100 Plymouth, MI 48170	☐ Property was repossessed. ☐ Property was foreclosed.				
		■ Property was garnishe	ed.			
		☐ Property was attached	, seized or levied.			
11.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		uding a bank or fin	ancial institution	set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a taken	ection was	Amount
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an □ No □ Yes		rty in the possessi	on of an assignee	e for the bene	efit of creditors, a

Case number (if known) 20-49256-mar

Official Form 107

Debtor 1 Valerie Brim

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	btor 1 Valerie Brim		Case number (if known)	20-49256-mar		
Par	rt 5: List Certain Gifts and Contribution	ons				
13	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?					
	■ No		, , , , , , , , , , , , , , , , , , ,	p		
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$6 per person	600 Describe the gifts	Dates y the gift	rou gave Value s		
	Person to Whom You Gave the Gift an Address:	nd				
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No					
	☐ Yes. Fill in the details for each gift or contribution.					
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	ŕ	Dates y contrib			
Par	rt 6: List Certain Losses					
	or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending		d. List pending loss	your Value of property lost		
	2010 Jeep Cherokee	insurance claims on line 33 of Schedule A	/B: Property. 1/2020	\$10,205.00		
Par	rt 7: List Certain Payments or Transfe	ers				
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone yo consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.						
	□ No■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	Description and value of any programme transferred transferred		ayment Amount of sfer was payment		
	Frego & Associates - The Bankrup Law 23843 Joy Road Dearborn Heights, MI 48127	ptcy Attorney Fees	8/25/20	920.00		
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.					
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and value of any programmed		ayment Amount of payment		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

Nο

Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5

-2020 Best Case, LLC - www.bestcase.com Best Case Bankruptcy Software Copyright (c) 1996 Doc 11 Filed 09/08/20 Entered 09/08/20 14:17:24 Page 33 of 35 20-49256-mar

Debtor 1 Valerie Brim Case number (if known) 20-49256-mar

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code)

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Debto	r 1 Valerie Brim		Case number (if known)	20-49256-mar
with a		ng a false statement, concealing property to \$250,000, or imprisonment for up to		property by fraud in connection
/s/ Va	alerie Brim			
Valer	ie Brim	Signature of Debtor 2		
Signa	ture of Debtor 1			
Date	September 8, 2020	Date		
Did yo	u attach additional pages to <i>Your Stat</i>	ement of Financial Affairs for Individual	s Filing for Bankruptcy (Official Form 107)?
■ No				
□ Yes				
Did yo	u pay or agree to pay someone who is	not an attorney to help you fill out bank	ruptcy forms?	
.				

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).